## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000000714

Entity Name: CHARLOTTE COUNTRY MUSIC CLUB, INC.

FILED Jan 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O SHIRLEY ADEES

PUNTA GORDA, FL 339512746 US

Current Mailing Address: New Mailing Address:

510898

PUNTA GORDA, FL 33951 US

FEI Number: 65-0290398 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GALLAGHER, JOHN HERGET, BRUCE 2005 RIVER BASIN DRIVE 104 JENNIFER DR

PUNTA GORDA, FL 33982 US ROTONDA WEST, FL 33947 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BRUCE HERGET 01/19/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ( ) Delete Title: P (X) Change( ) Addition

Name: GALLAGHER, JOHN Name: HERGET, BRUCE
Address: 2005 RIVER BASIN DRIVE Address: 104 JENNIFER DR

City-St-Zip: PUNTA GORDA, FL 33982 City-St-Zip: ROTONDA WEST, FL 33947

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: MILLER, GLORIA Name: AZZARELLO, DELORES

Address: 23258 DELAVAN AVE Address: 555 ROTONDA CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33954 City-St-Zip: ROTONDA WEST, FL 33947

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 MOORES, MARLYS
 Name:
 BRUMFIELD, EARL

 Address:
 822 VIA FORMIA
 Address:
 9105 RAVEL ST

City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PORT CHARLOTTE, FL 33981 52

Title: D () Delete Title: D (X) Change () Addition

 Name:
 GALLAGHER, LINDA
 Name:
 HOPKINS, JOANN

 Address:
 2005 RIVER BASIN DRIVE
 Address:
 16 LONGMEADOW LN

 City-St-Zip:
 PUNTA GORDA, FL 33950
 City-St-Zip:
 ROTONDA WEST, FL 33947

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE HERGET PD 01/19/2008